## CONSUMER TASK FORCE NOVEMBER 28, 2006 MEETING INDEX OF HANDOUTS

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- 2. Minutes from October 24, 2006
- 3. 2007 Schedule of Meetings
- 4. Project Updates
- 5. Systems Transformation Grant Overview Power Point Presentation

# CONSUMER TASK FORCE MEETINGS 2007

## MICHIGAN ASSOCIATION OF COMMUNITY MENTAL HEALTH BOARDS\* 426 SOUTH WALNUT STREET LANSING, MI

JANUARY 23, 2007 JULY 24, 2007

FEBRUARY 27, 2007 AUGUST 28, 2007

MARCH 27, 2007 SEPTEMBER 25, 2007

APRIL 24, 2007 OCTOBER 23, 2007

MAY 22, 2007 NOVEMBER 27, 2007

NOTE: This is the 3<sup>rd</sup> Tuesday due to the holiday

JUNE 26, 2007 DECEMBER 18, 2007

NOTE: This is the 3<sup>rd</sup> Tuesday due to the holiday

Dial-in number: 1-866-844-4957, Pass Code: 9656170#

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<sup>\*</sup> Location Subject to Change with Advance Notice

## CONSUMER TASK FORCE UPDATE OF PROJECTS NOVEMBER 2006

## Long-Term Care Supports and Services Advisory Commission November 2006

The LTCSS Advisory Commission met on October 23 in the Michigan Home Health Association conference room. They adopted a meeting schedule for calendar year 2007 which has them meeting the afternoon of the 4<sup>th</sup> Monday of each month. Adjustments will be made at a later date to accommodate holidays and summer break.

Evaluation: Carol Barrett, of So What? Planning and Evaluation was introduced. Carol has been contracted by the office to develop an SPE evaluation plan. She provided an overview of the approach she'll take in development of the plan. Carol considers herself a participatory evaluator whose role is to facilitate discussion, assist in building a structure, identify indicators and measures, and recommend data collection methodologies. Input will be solicited from stakeholders, including Advisory Commission members, throughout the development process. The goal is to have the evaluation plan ready for implementation by January 2007. A final evaluation is due in 2008 after the demonstration ends.

Retreat: Commissioners expressed a need to broaden their collective knowledge of long term care issues and generate some momentum in the conduct of Commission business. Consideration being made for a retreat scheduled around the January 2007 meeting to plan and prioritize work for the upcoming year.

Deficit Reduction Act/Money Follows the Person Grant: The Advisory Commission proovided a letter of support for the Office's application for funding under the Deficit Reduction Act/Money Follows the Person grant.

Public comment urged the inclusion of Centers for Independent Living in discussions at the state and local levels about overall project implementation and evaluation.

Commissioners continue to chart progress made in implementing Task Force recommendations. A discussion on Recommendation #4, Array of Services was held. Commissioners indicated a need to identify individuals (state staff) who can provide input in recent activities and progress made within state government. It was suggested that individuals who participated in the Task Force workgroups could be tapped for assistance for this activity as well.

The November meeting of the LTC Supports and Services Advisory Commission is scheduled for Monday, 11/27.

### SINGLE POINT OF ENTRY

### November 2006

#### **Vision**

Michigan's Long Term Care Connections are highly visible and trusted source where older adults and persons with disabilities (and family, professionals or chosen advocates) find information and assistance, plan, make choices, and access supports which maximize independence and maintain quality of life.

### **October Activities**

<u>Information and Assistance</u> service was started in all four regions. The number is 1-866-642-4582. During the first month we have been working with the phone company on a few problems related to the automatic transfer to the appropriate location. All sites have hired information and assistance staff and are training them using the new standards. They have only received a few calls this first month, only very limited promotion has occurred, outreach and market plans are being created.

Each site has assigned a management information person and a back up person to handle the phone and computer system work. These staff attended a day and ½ training on use of **Service Point**. A training site is also available on line, so staff can practice and so we can continue to modify and improve Service Point. Additional on site training will occur for the rest of the staff during November and December.

The **Resource Date** base workgroup developed inclusion/exclusion standards and a style guide. The UP will serve as the first test of using the data base, and information is now being entered.

West Michigan, Upper Peninsula, and South West have provided <u>Systems Mapping</u> reports at the <u>interagency workgroup</u> meetings. Detroit will present in January. So far there are some common factors identified in all the Long Term Care Connection (LTCC) reports. These include: the need to simplify and streamline; increase staff expertise; and the need to developed or expanded referral protocols.

### LOC

Communication between staff from the Office of Long Term Care Supports and Services, Medicaid, representatives from the 3 affected provider groups (Mi Choice Waiver, Nursing Facility and PACE), and staff from the LTCC are discussing a draft memorandum of understanding on protocols for referral and for LTCC to conduct the Level of Care Determination.

The OLTSS continues to explore moving to a mandatory referral requirement.

The <u>Functions Workgroup</u> is getting feedback on the Information and Assistance draft standards. They are also working on a 2<sup>nd</sup> draft of the standards for options counseling and person centered planning. A first draft of privacy standards and caregiver standards have been written and will be discussed at upcoming meetings.

### **MQCCC**

### **Overview of County Activities**

11/13/06

### There are over 384 active approved providers in 67 counties.

This number has actually declined somewhat due to providers who have become inactive.

We have offered Introductory Sessions in 80 counties.

### In 3 counties we have had no response to the mailing.

Alcona\* Keweenaw Leelanau

### The 16 counties where we do not have providers include 3 counties listed above and:

Alger <sup>2</sup>	Baraga <sup>2</sup>	Gratiot *2	Hillsdale <sup>2</sup>
Houghton <sup>2</sup> *	Huron* <sup>2</sup>	Kalkaska*2	Mackinac <sup>2</sup>
Manistee <sup>1</sup>	Montmorency*2	Otsego*1	Presque Isle <sup>3</sup> *

Schoolcraft<sup>2</sup>

### We have served over 274 consumers in 28 counties.

Antrim	Arenac	Bay	Eaton
Genesee	Gladwin	Huron	Ingham
Ionia	Isabella	Jackson	Kent
Lapeer	Livingston	Macomb	Menominee
Midland	Montcalm	Oakland	Ontonagon
Otsego	Saginaw	Schoolcraft	St. Clair
Tuscola	Washtenaw	Wayne	Wexford

<sup>\*</sup> Actually has provider from another county who is willing to provide in this county

<sup>&</sup>lt;sup>1</sup> Has providers pending approval.

<sup>&</sup>lt;sup>2</sup> Have tried to hold introductory sessions but the providers either didn't show, were from another county, were denied or decided against being placed on the registry.

<sup>&</sup>lt;sup>3</sup> Only provider asked to be removed from the Registry

## INDEPENDENCE PLUS/MONEY FOLLOWS THE PERSON November 2006

The annual report on Independence Plus Grant was recently completed. The activities of the Consumer Task Force (CTF) as well as the efforts of the Michigan Disability Resource Center (MDRC) were noted and appreciated in this document.

A useful planning form for non-profits to use for communicating their message to the public or to stakeholders is called the Smart Chart from Spitfire Strategies. This planning tool can be downloaded at: http://www.spitfirestrategies.com/recommends/21

The "Employing, Supporting and Retaining Your Personal Assistants Train-the-Trainer Workshop" has completed the 8 scheduled sessions, meeting in Allegan County. Eighteen of the twenty-two program participants completed the training. Our plan with this contract with the Paraprofessional Healthcare Institute (PHI) is to use a train-the-trainer model to develop local training capacity, utilizing trainer pairs of staff and consumers. Based on participation and feedback, the curriculum seems to meet the need as far as content, format and complexity. The course is seemingly appropriate for both MI and DD consumers; staff with little or lots of training experience. As we review the evaluation and trainer reports for this class, we will prepare to next pilot the material with elders entering the MI-Choice Self-Determination arrangements.

A draft of a graphic view for the implementation pathway for Person-Centered Planning for community based Long-Term Care is included for CTF review. This chart describes the activities supporting PCP implementation at all levels within an organization. Please send your comments to Rob Curtner at curtnerr@mi.gov or call 517 335-8710.

The following is an list of the November training events put on by Michigan Partners for Freedom (MPF):

- <u>Genesee</u> County- Local Leader Training, November 3<sup>rd</sup>, 15 local leaders trained <u>Berrien</u> County- Community Training, November 8<sup>th</sup>, 40 people attended
- Oakland County- Local Leader Training, November 28<sup>th</sup>
  - o Contact Person: Annette Downey, Community Living Services
- Wayne County- Community Training, November 29<sup>th</sup> (see attached flier)
  - o Contact Person: Chris Lerchen, The Arc of Northwest Wayne County

## Medicaid Infrastructure Grant (MIG) November 2006

There are presently 851 Freedom to Work (FTW) participants. This is up from 825 last month.

MIG outreach: Marty shared information at the Michigan Rehab Conference (MRC) in Traverse City November 15-17. In addition, he conducted outreach in Macomb County to providers (there were nearly 100 consumers in attendance). Several other community presentations are scheduled.

Joe Longcor, Tony Wong, and Esther Onaga (MSU) also presented a focused summary on the FTW evaluation conducted by MSU at the MRC.

MIG staff including Tony Wong attended a conference hosted by the National Consortium for Health Systems Development (the MIG technical assistance provider). Sessions covered subjects including Business Leadership Networks, Ticket to Work, Strategic Planning, Benefits/assets Planning (several on this topic), and the ever popular Transportation. In addition, there was a 1 ½ day meeting with CMS focused on the topic of resource/research development and analysis.





Building Statewide Demand For Self-Determination

## Come One! Come All!

Self-Determination is for everyone!

If you have a disability and want to get more control of your life, your supports, your services, and the people in your life –

Join the MICHIGAN PARTNERS for FREEDOM on November 29, 2006

Date:

November 29, 2006

Location:

Wayne County Regional Education Service Agency (WCRESA) ANNEX AUDITORIUM 33500 Van Born Wayne, MI 48184

Time:

10:00 p.m. to 3:00 p.m. Lunch included

At this day long workshop, we will share:

- What self-determination can mean for your future
  - ⇒What tools you need
    - ⇒How you can help make Self-Determination a reality for all citizens of Michigan

## This workshop is FREE!

For more information call: The Arc of Northwest Wayne County 313-532-7915

REGISTRATION FORM: Name: Address:	
Phone:	
Email: Accommodation/Dietary Needs	

This event is funded by the Michigan Developmental Disabilities Council grant # 2004000.

# Person-Centered Planning in Community Based Long-Term Care Implementation Pathway Elements

WHO?

11101			DRAFT DOCUMENT		
Agency Leadership Adm./ Board	•Model Person- Centered language •Provide flexibility for time to do PCP •Go on-record as supporting PCP	•Identify changes needed at all levels in organization •Lead the change •Provide rewards •Expect & utilize resistance to change	•Policy expectations include Person-Centered Thinking and PCP in all activities.	<ul> <li>Policy base expects &amp; recognizes PCP as basis for assisting participants.</li> <li>Consumer orientation extends to all levels of care</li> </ul>	Develop meaningful     CQI plan & monitor     results and progress     Use quality data to make     decisions     Measure effectiveness
	+	+	+	+	+
Staff	Observe/mentor others Train all staff in PCP Develop skills in observed practice Manage performance expectations	•Ask for and give feedback •Internalize values of PCP •Develop policy and Make policy work	•Write, practice and improve PCP policy with consumer input	Coaching & supervision on PCP performance.  Ask key questions to determine needs & wants	Pollow CQI* plan ID ways to improve PCP Use quality data to make decisions Ask good questions
	+	+	+	+	+
Consumer – Participants	Provide PCP orientation for supports & services     Families and allies are involved in training	Participant input to plan     & govern provider orgs.     Grievance/appeal     process includes use of outside advocates	<ul> <li>Consumer are involved with policy development</li> <li>Explain to participants the intent, responsibilities and features of PCP</li> </ul>	<ul> <li>Assure choice and control over plan</li> <li>Up-date plan as needed.</li> <li>Best practices includes PCP approach</li> </ul>	Track & follow-up on participants  Use quality of life measures  Participants are the experts on their own life
	+	+	+	+	+
Community	Use Person- Centered language in PR materials     Outreach activities for developing community supports	Choose and use supports     Set and monitor standards     and expectations for PCP     values in health care	•Make choice and control features of program part of outreach materials	Create community- wide expectations re: PCP     Actively recruit needed supports in community	•Report quality findings  •Ask for community input on service quality  •Broker needed supports
TASKS -	= Training & Communications	= Support for Culture Change	= Policy	= Clinical Best Practices & Documentation	= Continuous Quality Improvement

# MICHIGAN'S 2006 REAL CHOICE SYSTEMS TRANSFORMATION GRANT

# **CMS Systems Transformation Grants**

- System Transformation grants are designed to implement broader changes in states' systems infrastructure to support continued development of quality community based service options.
- Five year grant awards
- Michigan July 2006 application: \$3.0M
- In September, Michigan awarded \$2.4 M for 5 years
- First phase: Strategic Planning process
- Plan due to CMS in April 2007
- Plan approval required prior to implementation

# **Grant Application**

- Grant application described
  - Current level of system transformation
  - Description of current system
  - State's commitment to achieving transformation
    - Governor's Medicaid LTC Task Force
    - Executive Order 2005-14
    - SPE demonstration projects
    - Other Real Choice Systems Change grants
      - Independence Plus
      - Money Follows the Person
- Proposed transformation goals and objectives

# **CMS Transformation Goal Options**

- 1. Improved Access to Long-Term Support Services: Development of One-Stop System
- 2. Increased Choice and Control: Development/Enhancement of Self-Directed Service Delivery System
- 3. Comprehensive Quality Management System
- 4. Transformation of Information Technology to Support Systems Change
- 5. Creation of a System that More Effectively Manages the Funding for Long-term Supports that Promote Community Living Options
- 6. Long-Term Supports Coordinated with Affordable and Accessible Housing

## **Transformation Goals**

Goal #1

Improved Access to Long-Term Care Support Services:

Development of a One-Stop System (Single Point of Entry)

# Goal #1 – Single Point of Entry

- Build from the SPE demonstration projects to implement a statewide network of Single Points of Entry:
  - Provide a statewide information and education campaign about planning for and accessing LTC
  - Develop a statewide shared database and client support system networked to referral points, providers and the SPEs
  - Develop mechanisms to embed consumer choice and direction into the single point of entry programs

# Goal #1 - Single Point of Entry

## **Objectives:**

- Provide awareness, information and assistance
- Streamline multiple eligibility processes
- Target individuals who are at imminent risk for admission to an institution

## **Transformation Goals**

Goal #2

**Increased Choice and Control:** 

Development of a Self-Directed Service Delivery System

## Goal #2 – Self-Direction

- LTC Task Force recommended that personcentered planning be the organizing principle for SPEs and for all LTC supports and services
- Independence Plus CMS grant builds personcentered planning into the MI Choice Waiver
- Robert Wood Johnson Foundation Cash & Counseling grant builds principles and practices of self-determination into MI Choice

## Goal #2 – Self-Direction

## Objectives:

- Develop person-centered planning
- Develop individual budgeting for long-term care
- Develop participant-employer options in long-term care
- Ensure participant-directed supports in community long-term care services
- Promote quality improvement that builds from consumer feedback about service experiences and resulting quality of life

## **Transformation Goals**

Goal #3

Creation of a System that More Effectively

Manages the Funding for Long-Term

Supports that Promotes Community Living

Options

# **Goal #3- Managing Funding**

- Michigan system is viewed as out of balance
- Money Follows the Person Real Choice grant aimed to develop MFP methods
- Long-Term Care Task Force recommended that Michigan apply the Money Follows the Person principles to long-term care financing
- Strengthen the basis for adequately financing LTC services, including community options such as MI Choice in order to truly offer consumers choice

# **Goal #3- Managing Funding**

## Objectives

- Develop and implement data analysis and information management to support flexible state budgeting for LTC
- Develop and implement more effective payment methodologies
  - Case mix payment methodologies
  - Prepaid health plan options for LTC
- Target high-cost individuals and services geographic area with high unmet need

# Strategic Planning Budget

- Project Director and Evaluation/Data Analyst
- Consumer support for participation in planning
- Planning retreat
- Community Living Exchange technical assistance
- MPHI evaluation support
- Travel, supplies, etc.

# Strategic Plan

CMS requires States to complete a strategic plan:

- Approximately a nine-month process from Oct 2006
- Extensively consumer & stakeholder involvement
- Four work groups; one for each goal and one for evaluation to be initiated in January 2006
- Two-day retreat (projected February 2006), plus follow-up meetings
- Community Living Exchange will facilitate
- External evaluation provided by the Michigan Public Health Institute